

EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box seal is broken for ballot transport~

At Location

Election Type: General Election

Election Date: 11/08/2022

Name of Location: MOUNTAIN PARK HEALTH CENTER VC# 15680

Arrival Time: 10:33

Were there ballots to be picked up?



YES <If YES, complete lines 1-7



NO <If NO, complete lines 1-7

Spoils picked up?



YES



NONE

Completed Forms picked up?



YES



NONE

1) Blue Drop Box Seals # NO seals & 1522019628 & 1522019629 <Indicate the seal numbers that were taken off on blue drop box

2) Blue Drop Box Seals # 1522019628 & 1522019629 <Indicate the seal numbers that were placed on blue drop box

3) Red Box Seals # 1522019630 & 1522019629 <Indicate the seal numbers that were placed on ballot transport box

4) Ballot Box Sealed/Checked on (Date) 10/28/22 (Time) 10:00 Date and time box was sealed/checked

5) Location Staff Member (Signature) Holly Richmond

6) Transport Staff Member (Signature) [Signature]

7) Transport Staff Member (Signature) [Signature]

Departure Time: 10:43

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature) [Signature]

Sign to acknowledge receipt from Transport Staff Member

Date/Time: 10/28/22

Date of Audit Match

Ballot Box Seals # 1522019630 & 1522019629 <If applicable, verify the seal numbers on the box match the above from location

Blue Drop Box Seals # NONE & NONE <Indicate the seal numbers that were broken from blue drop box

Count of Ballots in Transport Bin # 7

Audit Agent (Signature) [Signature]

Sign to affirm seal #'s match or that no ballots were to be picked up

Date/Time: 10/28/22

Date of Audit Match

